

APPLICATION FOR EMPLOYMENT WITH FREDERICK COUNTY, MD.

Instructions: Read the Recruitment Announcement relating to this position and be sure you have the requirements stated. Type or print your answers in ink. Answer every question clearly and completely. All statements are subject to investigation and verification. Where a question does not apply, answer "none" or "n/a." Attach continuation sheets where necessary and sign each sheet. Do not attach original certificates or licenses; attach copies only.

RETURN TO: DIVISION OF HUMAN RESOURCES, FREDERICK COUNTY GOVERNMENT, 12 EAST CHURCH STREET FREDERICK, MARYLAND 21701

1. Full Legal Name			4. Position Applied For			8. Do you have a valid driver's license? <input type="checkbox"/> yes <input type="checkbox"/> No State _____ Lic# _____ Lic. Class _____				
Last Name _____ First Name _____ Middle Name _____			5. Lowest Acceptable Pay Rate							
2. Mailing Address			6. Home Phone (____) _____							
Number _____ Street _____ Apt. _____			Work Phone (____) _____							
3. City, State & Zip Code			Cell Phone (____) _____			9. Are you now employed by Frederick County Government? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Zip Code _____			E-mail Address _____							
11. Give name and location of elementary, middle or high school last attended:			7. Are you under 18? <input type="checkbox"/> Yes <input type="checkbox"/> No			10. When are you available to start work?				
12. Name and location of Undergraduate College or University			Major subjects studied - Specify credit hours			Check highest school year completed: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>		Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Did you earn a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No	
13. Name and location of Graduate University			Major subjects studied - Specify credit hours			Total Credit Hours		Level of Degree Received	Field	
14. Complete this item if you have taken courses at business, trade, armed services or correspondence school.			Name and location of school			Subject		Total Hours	Total weeks	Date Finished
15. May we ask your present employer about you? <input type="checkbox"/> Yes <input type="checkbox"/> No			16. Do you have relatives employed with Frederick County Government? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, state name, relationship and department _____			17. Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, explain in item 18 below)			18. Remarks. Use this space to list any related qualifications not covered elsewhere in your application (such as honors, driver's license for a vehicle other than passenger car, other licenses, memberships in professional organizations, technical skills, or special training) or other information requested as part of this application.	

UNDER MARYLAND LAW AN EMPLOYER MAY NOT REQUIRE OR DEMAND THAT ANY APPLICANT FOR EMPLOYMENT OR ANY EMPLOYEE SUBMIT TO OR TAKE A POLYGRAPH, LIE DETECTOR OR SIMILAR TEST OR EXAMINATION AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT (EXCEPT IN THE CASE OF LAW ENFORCEMENT/CORRECTIONS EMPLOYMENT). ANY EMPLOYER WHO VIOLATES THIS PROVISION IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT TO EXCEED \$100.00. I HEARBY ACKNOWLEDGE THAT I HAVE READ THE FOREGOING STATEMENTS.

Date _____ Signature _____
(NOTE: SIGNATURE IS NOT REQUIRED IF SUBMITTING THE APPLICATION FORM ELECTRONICALLY UNTIL OFFER OF EMPLOYMENT IS MADE)

Frederick County Government does not discriminate on the basis of race, color, national origin, marital status, sex, religion, age and/or disability in employment or the provision of services.

FOR COUNTY USE – DO NOT WRITE BELOW THIS LINE

Date Received _____	Exam	Raw	Conv	Wgt	Grade	Notification
	Written					
	Oral					

20. Experience: In the blocks below, list the required information concerning each previous position. if you have had military service, enter it below in its proper sequence. All periods of time unaccounted for in the blocks will be considered periods of unemployment. Be sure to include all related experience. if you were employed under another name, please indicate in item 18. It is important for you to furnish all information requested below in sufficient detail to enable the Division of Human Resources to give you full credit in evaluating your qualifications.

Present employer or most recent employer:

A. List Details Below	Position	Dates of employment (month, year) From: To:	# of mo.	Starting pay rate	Last pay rate
	Employer (Name and Address including City, State, and Zip)				# of hours worked per week.

Name, title and phone number of immediate supervisor:	No. of employees you supervised	Reason for leaving:

Describe duties, responsibilities and accomplishments:

B. List Details Below	Position	Dates of employment (month, year) From: To:	# of mo.	Starting pay rate	Last pay rate
	Employer (Name and Address including City, State, and Zip)				# of hours worked per week.

Name, title and phone number of immediate supervisor	No. of employees you supervised	Reason for leaving:

Describe duties, responsibilities and accomplishments:

I hereby certify that every statement I have made in this application is true and complete to the best of my knowledge and belief, and I understand that any false or incomplete statement I have made may result in my forfeiting all rights of employment with Frederick County, MD.

I hereby authorize Frederick County to obtain from my past employers, educational institutions, and/or any law enforcement agencies all data needed to support this application. I understand that Frederick County may require a State and National criminal history records check and background investigation of applicants for certain positions. If I am applying for one of these positions, I hereby consent to the performance of a State and National criminal history records check and background investigation. ☐ Yes ☐ No

Date _____ Signature of Applicant _____

WORK EXPERIENCE SUMMARY - CONTINUATION FORM TO APPLICATION FOR EMPLOYMENT - ITEM #20

You are to use this continuation form to provide additional information concerning previous positions you have held. It is important for you to furnish all information requested below in sufficient detail to enable the Division of Human Resources to give you full credit in evaluating your qualifications.

20. Experience: In the blocks below, list the required information concerning each previous position. If you have had military service, enter it below in its proper sequence. All periods of time unaccounted for in the blocks will be considered periods of unemployment. Be sure to include all related experience. If you were employed under another name, please indicate in item 18.

C. List Details Below	Position	Dates of employment (month, year)		HR-001 (Revised 03/09)	Starting pay rate	Last pay rate
	From: To:					
	Employer (Name and Address including City, State, and Zip)					# of hours worked per week:
Name, title and phone number of immediate supervisor:				No. of employees you supervised	Reason for leaving:	
Describe duties, responsibilities and accomplishments:						

D. List Details Below	Position	Dates of employment (month, year)			Starting pay rate	Last pay rate
	From: To:					
	Employer (Name and Address including City, State, and Zip)					# of hours worked per week:
Name, title and phone number of immediate supervisor:				No. of employees you supervised	Reason for leaving:	
Describe duties, responsibilities and accomplishments:						

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I hereby authorize Frederick County to obtain from my past employers, educational institutions, and/or any law enforcement agencies all data needed to support this application. I understand that Frederick County may require a State and National criminal history records check and background investigation of applicants for certain positions. If I am applying for one of these positions, I hereby consent to the performance of a State and National criminal history records check and background investigation. ☐ Yes ☐ No

Date _____ Signature of Applicant _____

E. List Details Below	Position	Dates of employment (month, year) From: To:	# of mo.	Starting pay rate	Last pay rate
	Employer (Name and Address including City, State, and Zip)				# of hours worked per week:

Name, title and phone number of immediate supervisor:	No. of employees you supervised	Reason for leaving:
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Describe duties, responsibilities and accomplishments:

F. List Details Below	Position	Dates of employment (month, year) From: To:	# of mo.	Starting pay rate	Last pay rate
	Employer (Name and Address including City, State, and Zip)				# of hours worked per week:

Name, title and phone number of immediate supervisor:	No. of employees you supervised	Reason for leaving:
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Describe duties, responsibilities and accomplishments:

I hereby certify that every statement I have made in this application is true and complete to the best of my knowledge and belief, and I understand that any false or incomplete statement I have made may result in my forfeiting all rights of employment with Frederick County MD.

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Date _____ Signature of Applicant _____

FREDERICK COUNTY AFFIRMATIVE ACTION DATA FORM

Frederick County, MD is pursuing an Affirmative Action program to ensure equal employment opportunity in its hiring practices. We are asking you to help us in this effort by completing the Affirmative Action Data Form below. Completing the Data Form will assist us in monitoring the effectiveness of our program. The completion of this form is not mandatory; however, your cooperation is appreciated. Thank You.

(1) Position Applied For _____ (2) Date _____

(3) Name _____

Last Name

First Name

Middle Name

(4) Birth Date _____ / _____ / _____
Mo. Day Year

(5) Sex: _____ Female _____ Male

(6) Ethnic Origin

(a) _____ White (b) _____ Black (c) _____ Hispanic (d) _____ Asian or Pacific Islander

(e) _____ American Indian or Alaskan Native

NOTE: Ethnic origin is defined by the Federal Equal Employment Opportunity Commission as follows:

White - (Not of the Hispanic origin) All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

Black - (Not of the Hispanic origin) All persons having origins in any of the Black racial groups of Africa.

Hispanic - All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture origin, regardless of race.

Asian or Pacific Islanders - All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.

American Indian or Alaskan Native - All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliations or community recognition.

(7) Do you have a disability? _____ Yes _____ No

If so, what is the nature of your disability? _____

A disabled person is defined as someone who has a physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment.

(8) Veteran? _____ Yes _____ No

(9) How did you hear of the job for which you are applying?

_____ Frederick County Website _____ Other Website (please list): _____

_____ Newspaper Advertisement - Which Newspaper? _____

_____ County Cable Television Listing _____ Posted County Job Announcement _____ County Employee

_____ Job Service Office _____ Other - Explain: _____